

**MULTIPLE DEPENDENT CLAIM
FEE CALCULATION SHEET**

SERIAL NO. 10823131
APPLICANT(S)

FILING DATE 04/13/04

CLAIMS

	AD FILLED		ADDITIONAL ASSIGNMENT		ADDITIONAL ASSIGNMENT	
	CHD	DEP	CHD	DEP	CHD	DEP
1	1					
2		1				
3		1				
4		1				
5		2				
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TOTAL NO.	1	1				
TOTAL DEP.	2					
TOTAL CLAIMS	2					

	CHD	DEP	CHD	DEP	CHD	DEP
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TOTAL NO.						
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